


<h1 style="text-align: center;">TRANSMITTAL FORM</h1> <p style="text-align: center;">(to be used for all correspondence after initial filing)</p>		Application Number	10/549,778
		Filing Date	September 19, 2005
		First Named Inventor	Mingyue He
		Art Unit	1645
		Examiner Name	Not Yet Assigned
Total Number of Pages in This Submission		Attorney Docket Number	MKC-005

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Copy of Notification of Missing Requirements Declaration and Power of Attorney for Utility or or Design Patent Application Certificate of First Class Mailing Return Receipt Postcard
<div style="border: 1px solid black; padding: 5px; min-height: 100px;">         Remarks       </div>		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	GOODWIN PROCTER LLP		
Signature			
Printed name	Randall D. Morin		
Date	August 17, 2006	Reg. No.	58,312

I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being deposited with the U.S. Postal Service on the date shown below with sufficient postage as First Class Mail, in an envelope addressed to: MS PCT, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Dated: August 17, 2006

Signature:  (Randall D. Morin)

<b>Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).</b> <h2 style="text-align: center; margin: 0;">FEE TRANSMITTAL</h2> <h3 style="text-align: center; margin: 0;">For FY 2006</h3>		<b>Complete if Known</b>	
		Application Number	10/549,778
		Filing Date	September 19, 2005
		First Named Inventor	Mingyue He
		Examiner Name	Not Yet Assigned
		Art Unit	1645
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Attorney Docket No.	MKC-005
<b>TOTAL AMOUNT OF PAYMENT</b>		<b>(\$)</b> 1,430.00	

<b>METHOD OF PAYMENT</b> (check all that apply)	
<input checked="" type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____	
<input type="checkbox"/> Deposit Account            Deposit Account Number: <u>07-1700</u> Deposit Account Name: <u>Goodwin Procter LLP</u>	
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)	
<input type="checkbox"/> Charge fee(s) indicated below <input type="checkbox"/> Charge fee(s) indicated below, <b>except for the filing fee</b>	
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17 <input checked="" type="checkbox"/> Credit any overpayments	

<b>FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.)</b>																												
<b>1. BASIC FILING, SEARCH, AND EXAMINATION FEES</b>																												
	FILING FEES		SEARCH FEES		EXAMINATION FEES																							
		Small Entity		Small Entity		Small Entity																						
<u>Application Type</u>	<u>Fee (\$)</u>	<u>Fee (\$)</u>	<u>Fee (\$)</u>	<u>Fee (\$)</u>	<u>Fee (\$)</u>	<u>Fee (\$)</u>	<u>Fees Paid (\$)</u>																					
Utility	300	150	500	250	200	100	_____																					
Design	200	100	100	50	130	65	_____																					
Plant	200	100	300	150	160	80	_____																					
Reissue	300	150	500	250	600	300	_____																					
Provisional	200	100	0	0	0	0	_____																					
<b>2. EXCESS CLAIM FEES</b>																												
<b>Fee Description (with claims as amended in Preliminary Amendment enclosed herewith)</b>							Small Entity																					
							Fee (\$)																					
Each claim over 20 (including Reissues)							50																					
Each independent claim over 3 (including Reissues)							200																					
Multiple dependent claims							360																					
							180																					
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 20%;"><u>Total Claims</u></td> <td style="width: 10%;"><u>Extra Claims</u></td> <td style="width: 10%;"><u>Fee (\$)</u></td> <td style="width: 10%;"><u>Fee Paid (\$)</u></td> <td style="width: 20%;"></td> <td style="width: 20%;"><u>Multiple Dependent Claims</u></td> <td style="width: 10%;"></td> </tr> <tr> <td style="text-align: center;">45</td> <td style="text-align: center;">= 25</td> <td style="text-align: center;">x 25</td> <td style="text-align: center;">= 625</td> <td></td> <td style="text-align: center;">Fee (\$)</td> <td style="text-align: center;">Fee Paid (\$)</td> </tr> <tr> <td colspan="4"></td> <td></td> <td style="text-align: center;">180</td> <td style="text-align: center;">_____</td> </tr> </table>							<u>Total Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>		<u>Multiple Dependent Claims</u>		45	= 25	x 25	= 625		Fee (\$)	Fee Paid (\$)						180	_____	
<u>Total Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>		<u>Multiple Dependent Claims</u>																							
45	= 25	x 25	= 625		Fee (\$)	Fee Paid (\$)																						
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<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 20%;"><u>Indep. Claims</u></td> <td style="width: 10%;"><u>Extra Claims</u></td> <td style="width: 10%;"><u>Fee (\$)</u></td> <td style="width: 10%;"><u>Fee Paid (\$)</u></td> <td style="width: 20%;"></td> <td style="width: 20%;"></td> <td style="width: 10%;"></td> </tr> <tr> <td style="text-align: center;">8</td> <td style="text-align: center;">= 5</td> <td style="text-align: center;">x 100</td> <td style="text-align: center;">= 500</td> <td></td> <td></td> <td></td> </tr> <tr> <td colspan="7">HP = highest number of independent claims paid for, if greater than 3.</td> </tr> </table>							<u>Indep. Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>				8	= 5	x 100	= 500				HP = highest number of independent claims paid for, if greater than 3.							
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8	= 5	x 100	= 500																									
HP = highest number of independent claims paid for, if greater than 3.																												
<b>3. APPLICATION SIZE FEE</b>																												
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).																												
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 20%;"><u>Total Sheets</u></td> <td style="width: 10%;"><u>Extra Sheets</u></td> <td style="width: 10%;"><u>Number of each additional 50 or fraction thereof</u></td> <td style="width: 10%;"><u>Fee (\$)</u></td> <td style="width: 10%;"><u>Fee Paid (\$)</u></td> <td style="width: 20%;"></td> <td style="width: 10%;"></td> </tr> <tr> <td colspan="7">_____ - 100 = _____ / 50 _____ (round up to a whole number) x _____ = _____</td> </tr> </table>								<u>Total Sheets</u>	<u>Extra Sheets</u>	<u>Number of each additional 50 or fraction thereof</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>			_____ - 100 = _____ / 50 _____ (round up to a whole number) x _____ = _____													
<u>Total Sheets</u>	<u>Extra Sheets</u>	<u>Number of each additional 50 or fraction thereof</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>																								
_____ - 100 = _____ / 50 _____ (round up to a whole number) x _____ = _____																												
<b>4. OTHER FEE(S)</b>																												
Non-English Specification, \$130 fee (no small entity discount)							_____																					
Other (e.g., late filing surcharge):							_____																					
Extension for response within first month							60.00																					
Surcharge-Late oath or declaration							65.00																					

<b>SUBMITTED BY</b>			
Signature		Registration No. (Attorney/Agent)	58,312
Telephone	(617) 570-1000		
Name (Print/Type)	Randall D. Morin		Date
August 17, 2006			

I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being deposited with the U.S. Postal Service on the date shown below with sufficient postage as First Class Mail, in an envelope addressed to: MS PCT, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.	
Dated: August 17, 2006	Signature:  (Randall D. Morin)

Application No. (if known): 10/549,778

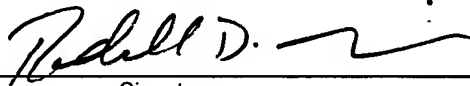
Attorney Docket No.: MKC-005

## Certificate of Mailing under 37 CFR 1.8

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to:

Mail Stop PCT  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

on August 17, 2006  
Date



Signature

1  
Randall D. Morin

Typed or printed name of person signing Certificate

58,312  
Registration Number, if applicable

(617) 570-1000  
Telephone Number

Note: Each paper must have its own certificate of mailing, or this certificate must identify each submitted paper.

- Transmittal Form (1 page)
- Fee Transmittal (1 page)
- Preliminary Amendment and Response to Notification of Missing Requirements Under 35 USC 371 (7 pages)
- Declaration and Power of Attorney for Utility or Design Patent Application (3 pages)
- Copy of Notification of Missing Requirements Under 35 USC 371 (2 pages)
- One Month Request for Extension of Time Under 37 CFR 1.136(a) (1 page)
- Check in the amount of \$1,430.00



## UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE  
 United States Patent and Trademark Office  
 Address: COMMISSIONER FOR PATENTS  
 P.O. Box 1450  
 Alexandria, Virginia 22313-1450  
 www.uspto.gov

U.S. APPLICATION NUMBER NO.	FIRST NAMED APPLICANT	ATTY. DOCKET NO.
10/549,778	Mingyue He	MKC-005

INTERNATIONAL APPLICATION NO.
-------------------------------

PCT/GB04/01211

I.A. FILING DATE	PRIORITY DATE
03/19/2004	03/19/2003

51414

GOODWIN PROCTER LLP  
 PATENT ADMINISTRATOR  
 EXCHANGE PLACE  
 BOSTON, MA 02109-2881

CONFIRMATION NO. 2186

371 FORMALITIES LETTER



\*OC000000018766207\*

Date Mailed: 05/18/2006

### NOTIFICATION OF MISSING REQUIREMENTS UNDER 35 U.S.C. 371 IN THE UNITED STATES DESIGNATED/ELECTED OFFICE (DO/EO/US)

The following items have been submitted by the applicant or the IB to the United States Patent and Trademark Office as a Designated / Elected Office (37 CFR 1.495).

- Indication of Small Entity Status
- Copy of the International Application filed on 09/19/2005
- Copy of the International Search Report filed on 09/19/2005
- Copy of IPE Report filed on 09/19/2005
- Information Disclosure Statements filed on 03/17/2006
- Biochemical Sequence Diskette filed on 09/19/2005
- Biochemical Sequence Listing filed on 09/19/2005
- U.S. Basic National Fees filed on 09/19/2005
- Priority Documents filed on 09/19/2005

The applicant needs to satisfy supplemental fees problems indicated below.

The following items **MUST** be furnished within the period set forth below in order to complete the requirements for acceptance under 35 U.S.C. 371:

- Additional claim fees of **\$625** as a small entity, including any required multiple dependent claim fee, are required. Applicant must submit the additional claim fees or cancel the additional claims for which fees are due.
- Oath or declaration of the inventors, in compliance with 37 CFR 1.497(a) and (b), identifying the application by the International application number and international filing date.
- To avoid abandonment, a surcharge (for late submission of filing fee, search fee, examination fee or oath or declaration) as set forth in 37 CFR 1.492(h) of \$65 for a small entity in compliance with 37 CFR 1.27, must be submitted with the missing items identified in this letter.

**SUMMARY OF FEES DUE:**

Total additional fees required for this application is \$690 for a Small Entity:

- \$65 Surcharge.
- Total additional claim fee(s) for this application is \$ 625
  - \$200 for 2 independent claims over 3.
  - \$425 for 17 total claims over 20.

**ALL OF THE ITEMS SET FORTH ABOVE MUST BE SUBMITTED WITHIN TWO (2) MONTHS FROM THE DATE OF THIS NOTICE OR BY 32 MONTHS FROM THE PRIORITY DATE FOR THE APPLICATION, WHICHEVER IS LATER. FAILURE TO PROPERLY RESPOND WILL RESULT IN ABANDONMENT.**

The time period set above may be extended by filing a petition and fee for extension of time under the provisions of 37 CFR 1.136(a).

Applicant is reminded that any communications to the United States Patent and Trademark Office must be mailed to the address given in the heading and include the U.S. application no. shown above (37 CFR 1.5)

*A copy of this notice **MUST** be returned with the response.*

FREDERICK SMITH

Telephone: (703) 308-9140 EXT 210

**PART 2 - OFFICE COPY**

U.S. APPLICATION NUMBER NO.	INTERNATIONAL APPLICATION NO.	ATTY. DOCKET NO.
10/549,778	PCT/GB04/01211	MKC-005